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February 4, 2008

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The Honorable Faul A. Crotty United States District Judge Daniel Patrick Moynihan United States Courthouse 500 Pearl Street, Room 735 New York, New York 10007

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Re:

State of New York, et al. v. United States Department of Health and Human

Services, 07-CV-8621 (PAC)

Dear Judge Crot y:

Pursuant to Your Honor's Individual Practices, Massachusetts Attorney General Martha Coakley hereby submits this pre-motion letter seeking leave to file an amicus brief in the abovecaptioned matter. The Commonwealth of Massachusetts' interest in this litigation is significant, as it currently exter ds coverage under its State Children's Health Insurance Program (SCHIP) to children in families with effective family income levels up to 300 percent of the federal poverty level. Plaintiff State of New York and defendant consent to our filing an amicus in this matter.

On August 17, 2007, the Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) issued a State Health Official letter concerning eligibility under the SCHIP program. Under the new rule, the Commonwealth of Massachusetts, along with many other states, would be able to continue to provide health coverage to low-income children over 250 percent of the federal poverty level only if CMS finds that the criteria outlined in its August 17 letter are satisfied. The letter advises that in the event that Massachusetts' state plan fails to satisfy these criteria, CMS "may pursue corrective action."

Since the inception of the SCHIP program in 1997, the federal government has accorded the states wide latitude in administering their own SCHIP programs. 42 U.S.C. § 1397bb(b), 42 C.F.R § 457.1. Massachusetts administers a combination Medicaid expansion and separate SCHIP program and until 2006, covered children with family incomes up to 200 percent of the federal poverty level. As part of Massachusetts' enactment of health care reform in 2006, the

MEMO ENDORSEL

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Commonwealth sought and received from CMS express approval to expand its income eligibility limit to 300 percent of the federal poverty level. Based on that approval, and in reliance upon it, Massachusetts took the necessary steps to extend coverage to those additional low-income children.

The August 17 letter departs from CMS' earlier approval in significant ways, by imposing different and more stringent limits. In so doing, it will likely impair the Commonwealth's ability to ensure adequate health insurance for its underserved children. The apparent rationale underlying the August 17 letter is to prevent "crowd-out," i.e., the substitution of public SCHIP coverage for private coverage. Such an assumption has questionable support and there is evidence which suggests that expanding, rather than limiting, eligibility positively affects participation rates among lower income children. In any event, the issues raised by CMS' newly imposed restrictions, and the assumptions underlying those new restrictions, appropriately are the subject for the type of public debate that the notice and comment requirements of the Administrative Procedure Act (APA) likely would elicit.

Thank you for your consideration of this request to participate as an amicus in this matter.

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HON, PAUL A. CROTTY

UNITED STATES DISTRICT JUDGE

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